POSITION INITIALS ID NO. DATE

FEE DETERMINATION
O.I.P.E. CLASSIFIER
FORMALITY REVIEW
RESPONSE FORMALITY REVIEW

7/43)
3/24/10

## INDEX OF CLAIMS

~	Rejected	N	***************************************	Non-elected
	Allowed		***************************************	
	(Through numeral) Canceled	Α		Appeal
÷	Restricted	0		Objected

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Claim	Date	Claim	Date	Claim Date	
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Pinal	0203	Final		Final	
37	7) <u>-</u>	51			
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28	<del></del>	77		127	
29	╅╂┼┼┼┼┼┼┼┼┼	78		128	
30	<del>┦╂┼╃╎┈┤╶╎┈╎┈╎</del> ┈╎	79		129	
31	╀╫┼┼┼┼┼┼┼	80	+   -   -   -	130	
32	╅╫┼═┼╶┼╌┼╌┼╌┤	82		131	
33	╁╂┼┼┼┼┼┼┼┼┼┼┤	83	+++++	132	
34	╅╫┼┼┼┼┼┼┼┼	84		133	
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36	<del>                                     </del>	86	+++-	135	
37	╁┋┼┼┼┼┼┼┼	87	+++++	137	
(38)		88	+++++	138	
39		89	+++++	139	
40		90	+++++		
41 .		91	++++		
42		92	++		
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45	† <del>                                    </del>	95	<del>               </del>		
46		96	++++	<del>  -   -   -   -   -   -   -   -   -   -</del>	
	† <b>!</b>	97	<del>                                     </del>	146	
48		98	+ + + + + + + + + + + + + + + + + + + +		
49		99	<del>                                      </del>	148 DEST AVAILABLE CC	40.00
50		100	<del>   - - - - -</del>  -	150	١

If more than 150 claims or 10 actions staple additional sheet here

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